



NOTICE OF APPEAL FROM THE PRIMARY EXAMINER
TO THE BOARD OF APPEALS

Applicant(s): Rex T. Gallagher and Garner T. Hauptert, Jr.

Serial No.: 09/506,246

Group Art Unit: 1614

Filed: February 17, 2000

Examiner: Cybille Delacroix-Muirheid

Confirmation No.: 7248

For: Process For Large-Scale Isolation and Purification of Hypothalamic Inhibitory Factor

CERTIFICATE OF MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to Assistant Commissioner for Patents, P.O. Box 2327, Arlington, VA 22202	
on <u>9.25.02</u>	<u>Jerine Crump</u>
Date	Signature
<u>Jerine Crump</u>	
Typed or printed name of person signing certificate	

Assistant Commissioner for Patents
Box AF
P.O. Box 2327
Arlington, VA 22202

10/03/2002 AWONDAF1 00000048 09506246

01 FC:219
02 FC:217

160.00 OP
460.00 OP

Sir:

Applicant hereby appeals to the Board of Appeals from the decision dated March 26, 2002 of the Primary Examiner finally rejecting claims 10, 19, 25, 31 and 39. The item(s) checked below are appropriate:

1. ☒ Applicant hereby petitions to extend the time for filing a Notice of Appeal in response to the Office Action Made Final dated March 26, 2002 for three month(s) from June 26, 2002 to September 26, 2002.
2. ☐ A month extension of time to respond to the Office Action Made Final dated was filed on with payment of a \$ fee.
☐ Applicant hereby petitions for an additional month extension of time to respond to the Office Action Made Final.
3. ☐ A Request for Oral Hearing before the Board of Patent Appeals and Interferences is being filed concurrently herewith.

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4. Fees are submitted for the following:

<input checked="" type="checkbox"/>	Extension of Time for three month(s)		\$ 460
<input type="checkbox"/>	Additional Extension of Time:		
	Fee for Extension	([] mo.)	\$
	Less fee paid	([] mo.)	- \$
	Balance of fee due		\$ 0
<input checked="" type="checkbox"/>	Notice of Appeal		\$ 160
<input type="checkbox"/>	Other		\$
		TOTAL	\$ 620

5. The method of payment for the total fees is as follows:

- ☒ A check in the amount of \$620.00 is enclosed.
- ☐ Please charge Deposit Account No. 08-0380 in the amount of \$[].

Please charge any deficiency or credit any overpayment in the fees that may be due in this matter to Deposit Account No. 08-0380. A copy of this document is enclosed for accounting purposes.

Respectfully submitted,

HAMILTON, BROOK, SMITH, REYNOLDS, P.C.

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Concord, MA 01742-9133

Date: September 25, 2002